Navigating "Barriers" to Effective Public Health Emergency Response- A Tool Kit

James S. Blumenstock

Chief Program Officer, Public Health Practice &
Acting Executive Director

Association of State and Territorial Health Officials (ASTHO)

PUBLIC HEALTH PREPAREDNESS
SUMMIT 2011

National Health
Security Strategy:
Building a Resilient Nation

Session Objectives

- Highlight Findings of the H1N1 Policy Barriers Assessment Project

- Preview the Tools Currently Under Development

- Seek Audience Input on Certain Feature of the Tool and Preferred Delivery Modalities

Purpose of Project

- To systematically identify and assess key policy barriers, both legal and non-legal that presented challenges and/or obstacles or were counterproductive/detrimental to a successful response.

- Chart a course of action to address the identified barriers to strengthen and improve future response efforts.

What is a Policy Barrier?

- Loosely defined as:
  - A plan, course of action, principle or procedure adopted by a governmental entity which impeded or impaired ability to more effectively respond.

  - Legal or non-legal

  - Of national, regional, or intrastate scope

  - Not necessarily operational, logistical, or administrative in nature

  - Seeking high-level policy matters warranting immediate attention

Methodology

a) Environmental scan

b) State and territorial survey

c) State-based field assessments

d) Review and input by an advisory work group

All leading to a final report

http://www.astho.org/Display/AssetDisplay.aspx?id=4933

Major Areas of Endeavor

a) ICS Command, Control, and Authority

b) Surveillance, Epidemiology, and Laboratory Services

c) Medical Care and Countermeasures

d) National Vaccination Campaign

e) Workforce Capacity and Infrastructure

f) Federal/State/Local Coordination

g) Communication

Findings

- Over 200 barriers identified:
  - Distilled down to 31
    - Most frequently identified
    - Most significant impact
    - Most pressing

- ▸ Final report contains:
  - ° Listing of barriers/issues
  - ° Issue type (legal versus policy)
  - ° Level (federal or state or both)
  - ° Discussion
  - ° Mitigation strategies employed
    - ° Recommendations

Advisory Work Group Engaged

- Draft report reviewed in May 2010

- General comments:
  - Well-designed, comprehensive, and useful
  - Suggested adding language to put project in fuller context (i.e., more balanced perspective)

Top Priority Areas

1. More consistent use of a unified command structure during the H1N1 outbreak would have benefited the response at all levels of government.

2. Delays in vaccine production and changing messages about its availability caused confusion for the public and damaged the credibility of governmental public health at all levels.

3. More consistency is needed nationally regarding surveillance strategies, data collection and analysis.

4. Federal stockpiling decisions affected state and local response activities and influenced the supply chain of key medical countermeasures.

Top Priority Areas

5. Delays and conflicts in federal guidance on respiratory protection (N95) led to confusion, caused shortages in supplies, and delayed the release of state and local stockpiles.

6. Public Health Emergency Response (PHER) grants provided states with the resources necessary to mount H1N1 response activities but the format and requirements for managing the grants were time consuming.

7. The H1N1 response strained public health laboratory capacity at the federal and state levels.

Top Priority Areas

8. Flexing the public health workforce was a challenge especially given restrictions on federally-funded positions at the state and local levels.

9. Federal, state and local health agencies need to use new and more effective strategies to reach special and vulnerable populations and minority communities.

The Way Forward

- Contribute to the "America Responds…" H1N1 Retrospective

- Pandemic and All Hazards Act (PAHPA) Reauthorization

- *The "Navigating Barriers to Effective Public Health Emergency Response Tool Kit" Project*

"Barriers" Tool Kit Project Objectives

- Develop set of tools that all public health officials can use to improve their understanding of critical legal barriers to effective infectious disease response and devise approaches to eliminating those barriers that reflect useful practices

- Deliver, nationally, informational webinars and other modalities to unveil and share these tools to improve practice

"Barriers" Candidate Topics

1. Statutory Authorities
2. Liability Protections
3. EUAs
4. Expanded Scope of Practice
5. Altered Standards of Care
6. Mandatory Vaccination/Treatment for HC Workers
7. Employment and Workplace Issues
8. Privacy Concerns
9. Budgetary, Procurement and Hiring

The Winners Are…!

1. Statutory Authorities and Liability Protections

2. Emergency Use Authorizations

3. Public Health Emergencies-Schools and Educational System Issues

4. Expanded Scope of Practice

Statutory Authorities and Liabilities Protections

- Federal Laws
    - Public Health Services Act
    - Stafford Act
    - Public Health Readiness and Preparedness Act
    - Social Security Act
    - National Emergencies Act
    - PAHPA
    - EMAC
    - Project Bioshield Act
    - Other

    Overview and History-What the Law Does-How the Law Works

    Also will Address State Law Issues

Emergency Use Authorizations

- Overview of EUA-Related Laws and Programs
- Liability Protections in the PREP Act
- Product Labeling Issues
- Informed Consent
- Evolving Legal and Policy Issues
- EUA authority and Process
  - Fact sheets and documentation
  - SLEP
  - Labeling
  - State Dispensing Laws
  - "Pre-EUAs"

School and Education System Issues

- Federal Law
  - FERPA
  - Control of Communicable Diseases
  - Privacy Issues (e.g. HIPAA)
  - Liability and Immunity
- State Law Issues
  - Vaccination: "Opt-in" vs. "Opt-out"
  - Use of School Facilities and Personnel
  - School Closure
  - Intergovernmental Coordination

Expanded Scope of Practice

- Federal Law
  - Liability and Compensation Issues
  - Payment and Reimbursement
  - Cross-jurisdictional Credentialing

- State Law
  - Liability and Compensation Issues
  - Cross-jurisdictional credentialing
  - State Interagency Issues (e.g. Boards of Pharmacy)
  - Emergency/Police Powers

Suite of Tools

- Executive Summaries
- Fact Sheets
- Issue Briefs
- Matrices/Comparisons
- Supplemental Information
    - Case studies
    - Federal citations
    - Bibliography of resources
    - Implementation tips
    - Other decision support tools/templates

"Barriers" Tools- The Roll-out

- Products targeted to be released by May 31, 2011

    www.astho.org

- A series of webinars are also planned: late Spring-Early Summer 2011

Well…What do you think??

- Potential value as a resource to help navigate the barriers?

- Are we missing anything?

- What types of tools do you feel will be of greatest value/assistance to you?

- Going forward, are there other legal barrier topics or issues that should be addressed?

Acknowlegements

ASTHO thanks the many who made this project possible

- CDC OPHPR (Jean O'Connor and Amy Feuss)
- CDC PHLP (Tony Moulton, Stacie Kershner, and Don Benken)
- Pat Elliott, Logan Circle Policy Group
- Members of the Advisory Work Groups
- ASTHO Staff (Preparedness and Infectious Disease Project Teams)
- Contributing State and Territorial Public Health Agencies
- YOU!

Thank You!

- For more information, please visit the ASTHO Website at: www.astho.org

- Contact Information:

  Jim Blumenstock

  jblumenstock@astho.org

  571-527-3134